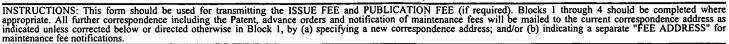
PART B - FEE(S) TRANSF

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000 or <u>Fax</u>



CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corrections or use Block 1)

03/02/2004

Sally J. Brown

7590

Autoliv ASP, Inc. 3350 Airport Road Ogden, UT 84405



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Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO, on the date indicated below.

Vickie Harris /	(Depositor's name)
Micke Harris	(Signature)
5-12-04	(Date)

FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. APPLICATION NO. FILING DATE 09/972.287 10/05/2001 14144 4864 James E. Nelson

TITLE OF INVENTION: AIRBAG MODULE Z-HEIGHT CONTROL TAB

	SMALL ENTITY	ISSUE FI	EE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1330)	\$300	\$1630	06/02/2004	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
ILAN, RUTH		3616		280-728200			
CFR 1.363). Change of correspond Address form PTO/SB/1	ee address or indication of "F tence address (or Change of (22) attached. ion (or "Fee Address" Indica or more recent) attached. Us	Correspondence	names of agents OR firm (havii agent) and	ting on the patent front p up to 3 registered pate, alternatively, (2) the na- ng as a member a registe the names of up to 2 ror agents. If no name is sted.	nt attorneys or ame of a single ered attorney or egistered patent	J. Brown	
3. ASSIGNEE NAME ANI	RESIDENCE DATA TO E	E PRINTED ON T	HE PATENT	(print or type)			
PLEASE NOTE: Unless been previously submitte (A) NAME OF ASSIGN				r on the patent. Inclusion Completion of this form is E: (CITY and STATE OR	of assignee data is only appropri NOT a substitute for filing an ass COUNTRY)	ate when an assignment ha aignment.	
Autoliv ASP	, Inc.		Ogden,	Utah			
Please check the appropriat	e assignee category or catego	ries (will not be pri	inted on the pa	tent); 🚨 individual	Corporation or other private g	roup entity 🚨 governmen	
a. The following fee(s) are	enclosed:	4b	. Payment of I	Fee(s):		· · <u>-</u>	
		☐ A check in the amount of the fee(s) is enclosed.					
Issue Fee		Payment by credit card. Form PTO-2038 is attached.					
☑ Issue Fee ☑ Publication Fee		☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).					

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2 2004 5			PTO/SB/21 (08-03) Approved for use through 08/30/2003. OMB 0651-0031 and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Wadder the Paperwork Reduction Act of 199	o, no persons	Application Number	on of information unless it displays a valid OMB control number. 09/972,287
TRANSMITTAL FORM		Filing Date	10/05/2001
		First Named Inventor	James E. Nelson
(to be used for all correspondence after initia	l filing)	Art Unit	3616
		Examiner Name	llan, Ruth
Total Number of Pages in This Submission		Attorney Docket Number	14144
	ENCI	LOSURES (Check all tha	t apply)
Fee Transmittal Form Fee Attached Amendment/Reply After Final Affidavits/declaration(s) Extension of Time Request Express Abandonment Request Information Disclosure Statement Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53		Drawing(s) Licensing-related Papers Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Addr Terminal Disclaimer Request for Refund CD, Number of CD(s)	After Allowance communication to Technology Center (TC) Appeal Communication to Board of Appeals and Interferences Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please Identify below): Issue & Publication Fee Credit Card Form PTO-2038 \$1,630.00
SIGNA	TURE C	F APPLICANT, ATTORN	EY, OR AGENT
Firm or Individual name Signature Autoliv ASP, Inc.	g Br		
Date 5/11/2	94		and the second s
	ERTIFIC	CATE OF TRANSMISSION	N/MAILING
			r deposited with the United States Postal Service with tents, P.O. Box 1450, Alexandria, VA 22313-1450 on
Typed or printed name Vickie Ha	rris		
Signature UUC	bie	Harris	Date 5-12-04

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PTO/SB/17 (10-03) Approved for use through 07/31/2006. OMB 0651-0032

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FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

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Complete if Known				
Application Number	09/972,287			
Filing Date	10/05/2001			
First Named Inventor	James E. Nelson			
Examiner Name	llan, Ruth			
Art Unit	3616			
Attorney Docket No.	14144			

METHOD OF PAYMENT (check all that apply)	FEE CALCULATION (continued)					
☐ Check ✓ Credit card ☐ Money ☐ Other ☐ None		3. ADDITIONAL FEES				
Deposit Account:	I —	Entity			,	
Deposit	Fee Code		Fee Code	Fee (\$)	Fee Description	Fee Paid
Account Number	1051	130	2051		Surcharge - late filing fee or oath	1
Deposit Account	1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	
Name The Director is authorized to: (check all that apply)	1053	130	1053	130	Non-English specification	
Charge fee(s) indicated below Credit any overpayments	1812	2,520	1812	2,520	For filing a request for ex parte reexamination	
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	
FEE CALCULATION	1251	110	2251	55	Extension for reply within first month	
1. BASIC FILING FEE	1252	420	2252	210	Extension for reply within second month	
Large Entity Small Entity	1253	950	2253	475	Extension for reply within third month	
Fee Fee Fee Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension for reply within fourth month	
1001 770 2001 385 Utility filing fee	1255	2,010	2255	1,005	Extension for reply within fifth month	
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of Appeal	
1003 530 2003 265 Plant filing fee	1402	330	2402	165	Filing a brief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403	145	Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 0.00	1452	110	2452	55	Petition to revive - unavoidable	
	1453	1,330	2453	665	Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,330	2501	665	Utility issue fee (or reissue)	1,330.00
Extra Claims below Fee Paid Total Claims 20** = X	1502 1503	480	2502		Design issue fee	
Independent 3**		640	2503		Plant issue fee	
Claims -3 ^	1460 1807	130	1460		Petitions to the Commissioner	
		50	180		Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity	1806	180	1806		Submission of Information Disclosure Stmt	
Code (\$) Code (\$)	8021	40	802	1 40	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	770	2809	9 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385	For each additional invention to be examined (37 CFR 1.129(b))	
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	385	, , , ,	
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	1802	900	1802		•	
	Other	fee (sp	ecify) _	Pı	ublication Fee	300.00
SUBTOTAL (2) (\$) 0.00 **or number previously paid, if greater, For Reissues, see above		٠.		Filing F	ee Paid SUBTOTAL (3) (\$) 1,630	0.00

SUBMITTED BY

(Complete (if applicable))

Name (Print/Type)

Sally J. Brown

Registration No. (Attorney/Agent)

Signature

(Attorney/Agent)

Date

S//11/04

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